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(Depositor's name)	Mary Jane DiPalma
(Signature)	man Jane & Alm
(Date)	July 25, 2007

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/656,838	09/05/2003	Jianjun Cheng	171-P01-008	8403

TITLE OF INVENTION: CYCLODEXTRIN-BASED POLYMERS FOR THERAPEUTICS DELIVERY

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APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$1000	09/04/2007
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Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternativ	3 registered patent attorr	ecys 1 Ropes &	Neave IP Group Gray LLP
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3. ASSIGNEE NAME A	AND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or typ	oe)		
PLEASE NOTE: Un recordation as set for	dess an assignee is ident th in 37 CFR 3.11. Com	ified below, no assignee pletion of this form is NO	data will appear on the part of the part o	atent. If an assignee is ic	lentified below, the doc	ument has been filed for
(A) NAME OF ASSI				and STATE OR COUNT	II MUTATAAT UUKKUU.	57 181945 1065683
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Please check the appropr	riate assignee category or	categories (will not be pr	rinted on the patent):	Individual 03 FC:800	1- 30.00 Di on or other private group	A Government
4a. The following fee(s)	are submitted:	41	b. Payment of Fec(s): (Plea	se first reapply any prev	iously paid issue fee she	own above)
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a. Applicant claim	is SMALL ENTITY state	is. See 37 CFR 1.27.	Db. Applicant is no long	ger claiming SMALL ENT	TTY status. See 37 CFR	. 1.27(g)(2).
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Typed or printed name David P. Halstead, J.D., Ph.D. Registration No. 44,735						
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FAX TRANSMISSION

DATE: July 25, 2007

PTO IDENTIFIER: Application Number 10/656,838

Patent Number

Inventor: Cheng et al.

MESSAGE TO: Office of Patent Publication

FAX NUMBER: (571) 273-2885

FROM: FIS

FISH & NEAVE IP GROUP, ROPES & GRAY LLP

David P. Halstead, J.D., Ph.D.

PHONE: (617) 951-7615

Attorney Dkt. #: ITI-P01-008

PAGES (Including Cover Sheet): 3

CONTENTS:

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		(8). A	pplication Num		10/656,838	<u></u>		
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METHOD OF PAYMEN	T (check all the	at appiy)						
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Plant	200		500	150	160	80		
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4. OTHER FEE(S)				·			Fees	Paid (\$)
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Signature &	0- 75			(ttorney/Agent)	44,735	Telephone	(617) 95	1-7615
Name (Print/Type) David P.	Halstead, J.[D., Ph.D.				Date	July 25	, 2007
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